



## Complete Summary

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### GUIDELINE TITLE

Supporting and strengthening families through expected and unexpected life events.

### BIBLIOGRAPHIC SOURCE(S)

Registered Nurses Association of Ontario (RNAO). Supporting and strengthening families through expected and unexpected life events. Toronto (ON): Registered Nurses Association of Ontario (RNAO); 2002 Jul. 48 p. [77 references]

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## SCOPE

### DISEASE/CONDITION(S)

- Expected life events (birth, schooling, adolescence, aging, and death)
- Unexpected life events (trauma/accidents, chronic illness, developmental delay and disability)

### GUIDELINE CATEGORY

Evaluation  
Management

### CLINICAL SPECIALTY

Family Practice  
Geriatrics  
Nursing  
Obstetrics and Gynecology  
Pediatrics

## INTENDED USERS

Health Care Providers  
Nurses

## GUIDELINE OBJECTIVE(S)

To present nursing best practice guidelines for supporting and strengthening families through expected and unexpected life events

## TARGET POPULATION

Families in Canada from all health care sectors who are facing expected and unexpected life events

## INTERVENTIONS AND PRACTICES CONSIDERED

Evaluation/Management

1. Measures to develop a genuine partnership with families
2. Assessment of individuals in the context of the family to identify whether assistance is required by the nurse to strengthen and support the family
3. Identification of resources and supports to assist families address life events
4. Education, organization, and policy approaches and strategies

## MAJOR OUTCOMES CONSIDERED

Effectiveness of interventions for assessing family needs and promoting family health during expected or unexpected life events

## METHODOLOGY

### METHODS USED TO COLLECT/SELECT EVIDENCE

Searches of Electronic Databases

### DESCRIPTION OF METHODS USED TO COLLECT/SELECT THE EVIDENCE

The guideline developers conducted an extensive literature search and reviewed articles comprising of research, theoretical papers and other discussion papers.

### NUMBER OF SOURCE DOCUMENTS

Not stated

### METHODS USED TO ASSESS THE QUALITY AND STRENGTH OF THE EVIDENCE

Expert Consensus

## RATING SCHEME FOR THE STRENGTH OF THE EVIDENCE

Not applicable

## METHODS USED TO ANALYZE THE EVIDENCE

Review

## DESCRIPTION OF THE METHODS USED TO ANALYZE THE EVIDENCE

Not stated

## METHODS USED TO FORMULATE THE RECOMMENDATIONS

Expert Consensus

## DESCRIPTION OF METHODS USED TO FORMULATE THE RECOMMENDATIONS

A panel of nurses with expertise in caring for families from practice, research, policy and academic sectors was established by the Registered Nurses Association of Ontario (RNAO). After defining the scope of the guideline; the panel conducted an extensive literature search and articulated values that are the underpinnings of working with families (this work was supported by the literature). The panel then reviewed articles comprising research, theoretical papers, and other discussion papers. Evidence to support the values was identified and specific actions pertaining to nursing was gathered. The panel then identified themes from the literature that led to the development of recommendations in three key areas.

## RATING SCHEME FOR THE STRENGTH OF THE RECOMMENDATIONS

Not applicable

## COST ANALYSIS

A formal cost analysis was not performed and published cost analyses were not reviewed.

## METHOD OF GUIDELINE VALIDATION

Clinical Validation-Pilot Testing  
External Peer Review

## DESCRIPTION OF METHOD OF GUIDELINE VALIDATION

An initial draft of the Registered Nurses Association of Ontario (RNAO) "Supporting and Strengthening Families Through Expected and Unexpected Life Events" nursing best practice guideline was reviewed by representative stakeholders and their feedback was incorporated. The stakeholders reviewing this guideline included clients, their families, staff nurses, various formal groups and

organizations, and are acknowledged at the front of this document. This guideline was further refined after an eight-month pilot implementation phase in selected practice settings in Ontario. Practice settings for RNAO nursing best practice guidelines are identified through a "request for proposal" process. The guideline was further refined taking into consideration the pilot site feedback and evaluation results.

## RECOMMENDATIONS

### MAJOR RECOMMENDATIONS

The following recommendations grow out of the "Flower (Em)power" framework discussed and illustrated in the original guideline document.

#### Practice Recommendations

##### Recommendation 1

Develop a genuine partnership with families by:

- Recognizing the family's assessment of the situation as essential
- Acknowledging and respecting the important role of family in health care situations
- Determining the desired degree of family involvement
- Negotiating the roles of both nurse and family within the partnership

##### Recommendation 2

Assess individuals in the context of the family (as they define it) to identify whether assistance is required by the nurse to strengthen and support the family. While a family assessment should include information in the following areas, it should be tailored to address the uniqueness of each family through examining:

- Family structure
- Environmental data
- Family strengths
- Family supports

##### Recommendation 3

Identify resources and supports to assist families address the life event, whether this is expected or unexpected. Resources should be identified within the following three categories:

- Intrafamilial
- Interfamilial
- Extrafamilial

##### Recommendation 4

Educate and provide information to nurses, families, policy-makers and the public to assist families to manage expected or unexpected life events.

### Educational Recommendations

#### Recommendation 5

Sustain a caring workplace environment conducive to family-centred practice by:

- Ensuring that nursing staff are oriented to family-centred care, including family assessment
- Ensuring that nurses have the awareness and ability to effectively access resources
- Providing ongoing opportunities for professional development for nursing staff, including knowledge and skills regarding family-centred care

### Organization and Policy Recommendations

#### Recommendation 6

Support the implementation of family-centred practice in the workplace by:

- Ensuring appropriate staffing levels, assignments, and staffing categories
- Implementing family-centred practices and policies
- Creating and maintaining physical work environments that are conducive to promoting family involvement
- Developing employee assistance programs promoting family health

#### Recommendation 7

Advocate for changes in public policy by:

- Lobbying for public discussion on family caregiving and the development of a public position on what level of caregiving is reasonable to expect from family caregivers, and at what point the public might expect the health care system to step in to provide care
- Lobbying for public education about the value and legitimacy of the role of family caregivers
- Lobbying for a full range of adequate and effective respite care programs which facilitate family caregiving
- Lobbying for consistency in funding, availability, and delivery of respite care programs across Ontario
- Lobbying for the funding of research projects that examine family as the recipients of care, caregiving and respite care, family as caregivers, and the application of lessons learned from this research into public policy and program development
- Lobbying for mechanisms within organizations for families to dialogue with one another in an open forum

#### Recommendation 8

Nursing best practice guidelines can be successfully implemented only if there are adequate planning, resources, organizational and administrative support, as well as the appropriate facilitation. Organizations may wish to develop a plan for implementation that includes:

- An assessment of organizational readiness and barriers to education
- Involvement of all members (whether in a direct or indirect supportive function) who will contribute to the implementation process
- Dedication of a qualified individual to provide the support needed for the education and implementation process
- Ongoing opportunities for discussion and education to reinforce the importance of best practices
- Opportunities for reflection on personal and organizational experience in implementing guidelines

In this regard, the Registered Nurses Association of Ontario (RNAO) (through a panel of nurses, researchers and administrators) has developed the Toolkit: Implementation of Clinical Practice Guidelines, based on available evidence, theoretical perspectives and consensus. The Toolkit is recommended for guiding the implementation of the RNAO nursing best practice guideline on "Supporting and Strengthening Families Through Expected and Unexpected Life Events."

#### CLINICAL ALGORITHM(S)

None provided

### EVIDENCE SUPPORTING THE RECOMMENDATIONS

#### TYPE OF EVIDENCE SUPPORTING THE RECOMMENDATIONS

In developing this guideline, the development panel drew their evidence from a variety of sources. The evidence was based on not only randomized controlled trials, but also on a number of qualitative sources, including studies that provided in-depth descriptions of family and nurse perceptions of their interactions with one another, and information about the relevance and helpfulness of nursing interventions involving families in care. Expert consensus was also utilized in this guideline when no other more scientifically formalized knowledge was available.

### BENEFITS/HARMS OF IMPLEMENTING THE GUIDELINE RECOMMENDATIONS

#### POTENTIAL BENEFITS

- Guideline implementation is intended to help nurses support and strengthen families through expected or unexpected life events.
- Nurses, other health care professionals and administrators who are leading and facilitating practice changes will find this document valuable for the development of policies, procedures, protocols, educational programs, assessment and documentation tools, etc.

#### POTENTIAL HARMS

Not stated

## QUALIFYING STATEMENTS

### QUALIFYING STATEMENTS

These best practice guidelines are related only to nursing practice and not intended to take into account fiscal efficiencies. These guidelines are not binding for nurses and their use should be flexible to accommodate client/family wishes and local circumstances. They neither constitute a liability or discharge from liability. While every effort has been made to ensure the accuracy of the contents at the time of publication, neither the authors nor Registered Nurses Association of Ontario (RNAO) give any guarantee as to the accuracy of the information contained in them nor accept any liability, with respect to loss, damage, injury or expense arising from any such errors or omission in the contents of this work. Any reference throughout the document to specific pharmaceutical products as examples does not imply endorsement of any of these products.

## IMPLEMENTATION OF THE GUIDELINE

### DESCRIPTION OF IMPLEMENTATION STRATEGY

Toolkit:

#### Implementing Clinical Practice Guidelines

Nursing best practice guidelines can be successfully implemented only where there are adequate planning, resources, organizational and administrative support, as well as the appropriate facilitation. In this regard, Registered Nurses Association of Ontario (RNAO) (through a panel of nurses, researchers and administrators) has developed The Toolkit for Implementing Clinical Practice Guidelines, based on available evidence, theoretical perspectives and consensus. The Toolkit is recommended for guiding the implementation of any clinical practice guideline in a health care organization.

The "Toolkit" provides step by step directions to individuals and groups involved in planning, coordinating, and facilitating the guideline implementation. Specifically, the "Toolkit" addresses the following key steps:

1. Identifying a well-developed, evidence-based clinical practice guideline
2. Identification, assessment and engagement of stakeholders
3. Assessment of environmental readiness for guideline implementation
4. Identifying and planning evidence-based implementation strategies
5. Planning and implementing evaluation
6. Identifying and securing required resources for implementation

Implementing guidelines in practice that result in successful practice changes and positive clinical impact is a complex undertaking. The "Toolkit" is one key resource for managing this process.

For specific recommendations regarding implementation of this guideline, refer to the "Major Recommendations" field.

#### Evaluation and Monitoring

Organizations implementing the recommendations in this nursing best practice guideline are recommended to consider how the implementation and its impact will be monitored and evaluated. A table in the original guideline document illustrates some indicators for monitoring and evaluation. It is based on a framework outlined in the RNAO Toolkit: Implementation of Clinical Practice Guidelines (2002).

### INSTITUTE OF MEDICINE (IOM) NATIONAL HEALTHCARE QUALITY REPORT CATEGORIES

#### IOM CARE NEED

End of Life Care  
Getting Better  
Living with Illness  
Staying Healthy

#### IOM DOMAIN

Effectiveness  
Patient-centeredness

### IDENTIFYING INFORMATION AND AVAILABILITY

#### BIBLIOGRAPHIC SOURCE(S)

Registered Nurses Association of Ontario (RNAO). Supporting and strengthening families through expected and unexpected life events. Toronto (ON): Registered Nurses Association of Ontario (RNAO); 2002 Jul. 48 p. [77 references]

#### ADAPTATION

Not applicable: The guideline was not adapted from another source.

#### DATE RELEASED

2002 Jul

#### GUIDELINE DEVELOPER(S)

Registered Nurses Association of Ontario - Professional Association

#### SOURCE(S) OF FUNDING



Funding was provided by the Ontario Ministry of Health and Long Term Care.

#### GUIDELINE COMMITTEE

Not stated

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#### FINANCIAL DISCLOSURES/CONFLICTS OF INTEREST

The Registered Nurses Association of Ontario (RNAO) received funding from the Ministry of Health and Long-Term Care (MOHLTC). This guideline was developed by a panel of nurses and researchers convened by the RNAO and conducting its work independent of any bias or influence from the MOHLTC.

#### GUIDELINE STATUS

This is the current release of the guideline.

#### GUIDELINE AVAILABILITY

Electronic copies: Available in Portable Document Format (PDF) from the [Registered Nurses Association of Ontario \(RNAO\) Web site](#).

Print copies: Available from the Registered Nurses Association of Ontario (RNAO), Nursing Best Practice Guidelines, 438 University Avenue, Suite 1600, Toronto, Ontario, M5G 2K8; Fax: (416) 599-1926; Order forms available on the [RNAO Web site](#).

#### AVAILABILITY OF COMPANION DOCUMENTS

The following is available:

- Toolkit: implementation of clinical practice guidelines. Toronto (ON): Registered Nurses Association of Ontario (RNAO); 2002 Jan. 91 p.

Electronic copies: Available in Portable Document Format (PDF) from the [RNAO Web site](#)

Print copies: Available from the Registered Nurses Association of Ontario (RNAO), Nursing Best Practice Guidelines, 438 University Avenue, Suite 1600, Toronto, Ontario, M5G 2K8; Fax: (416) 599-1926; Order forms available on the [RNAO Web site](#).

## PATIENT RESOURCES

The following is available:

- Health information fact sheet. Putting patients first. Toronto (ON): Registered Nurses Association of Ontario (RNAO); 2003 Nov. 2 p.

Electronic copies: Available in Portable Document Format (PDF) from the [Registered Nurses Association of Ontario \(RNAO\) Web site](#).

Print copies: Available from the Registered Nurses Association of Ontario (RNAO), Nursing Best Practice Guidelines, 438 University Avenue, Suite 1600, Toronto, Ontario, M5G 2K8; Fax: (416) 599-1926; Order forms available on the [RNAO Web site](#).

Please note: This patient information is intended to provide health professionals with information to share with their patients to help them better understand their health and their diagnosed disorders. By providing access to this patient information, it is not the intention of NGC to provide specific medical advice for particular patients. Rather we urge patients and their representatives to review this material and then to consult with a licensed health professional for evaluation of treatment options suitable for them as well as for diagnosis and answers to their personal medical questions. This patient information has been derived and prepared from a guideline for health care professionals included on NGC by the authors or publishers of that original guideline. The patient information is not reviewed by NGC to establish whether or not it accurately reflects the original guideline's content.

## NGC STATUS

This NGC summary was completed by ECRI on December 17, 2003. The information was verified by the guideline developer on January 16, 2004.

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